



94TH GENERAL ASSEMBLY
State of Illinois
2005 and 2006
HB4956

Introduced 1/19/2006, by Rep. Kevin Joyce

SYNOPSIS AS INTRODUCED:

410 ILCS 522/10-30

Amends the Illinois Adverse Health Care Events Reporting Law of 2005. Requires the adverse health event reporting system to be fully operational by July 1, 2007 (now, January 1, 2008). Effective immediately.

LRB094 18275 LJB 53586 b

1 AN ACT concerning health.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The Illinois Adverse Health Care Events
5 Reporting Law of 2005 is amended by changing Section 10-30 as
6 follows:

7 (410 ILCS 522/10-30)

8 Sec. 10-30. Establishment of reporting system.

9 (a) The Department shall establish an adverse health event
10 reporting system that will be fully operational by July 1, 2007
11 ~~January 1, 2008~~ and designed to facilitate quality improvement
12 in the health care system through communication and
13 collaboration among the Department and health care facilities.
14 The reporting system shall not be designed or used to punish
15 errors or, except to enforce this Law, investigate or take
16 disciplinary action against health care facilities, health
17 care practitioners, or health care facility employees. The
18 Department may not use the adverse health care event reports,
19 findings of the root cause analyses, and corrective action
20 plans filed under this Law for any purpose not stated in this
21 Law, including, but not limited to, using such information for
22 investigating possible violations of the reporting health care
23 facility's licensing act or its regulations. The Department is
24 not authorized to select from or between competing alternate
25 health care treatments, services, or practices.

26 (b) The reporting system shall consist of:

27 (1) Mandatory reporting by health care facilities of
28 adverse health care events.

29 (2) Mandatory completion of a root cause analysis and a
30 corrective action plan by the health care facility and
31 reporting of the findings of the analysis and the plan to
32 the Department or reporting of reasons for not taking

1 corrective action.

2 (3) Analysis of reported information by the Department
3 to determine patterns of systemic failure in the health
4 care system and successful methods to correct these
5 failures.

6 (4) Sanctions against health care facilities for
7 failure to comply with reporting system requirements.

8 (5) Communication from the Department to health care
9 facilities, to maximize the use of the reporting system to
10 improve health care quality.

11 (c) In establishing the adverse health event reporting
12 system, including the design of the reporting format and annual
13 report, the Department must consult with and seek input from
14 experts and organizations specializing in patient safety.

15 (d) The Department must design the reporting system so that
16 a health care facility may file by electronic means the reports
17 required under this Law. The Department shall encourage a
18 health care facility to use the electronic filing option when
19 that option is feasible for the health care facility.

20 (e) Nothing in this Section prohibits a health care
21 facility from taking any remedial action in response to the
22 occurrence of an adverse health care event.

23 (Source: P.A. 94-242, eff. 7-18-05.)

24 Section 99. Effective date. This Act takes effect upon
25 becoming law.